

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

*10844428*

## CLAIMS AS FILED - PART I

|   | (Column 1)           | (Column 2)   |
|---|----------------------|--------------|
| TOTAL CLAIMS  | <i>24</i>            |              |
| FOR   | NUMBER FILED         | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | <i>14</i> minus 20 = | <i>0</i>     |
| INDEPENDENT CLAIMS  | <i>3</i> minus 3 =   | <i>0</i>     |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |                      |              |

SMALL ENTITY  
TYPE ☐

OR  
OTHER THAN  
SMALL ENTITY

| RATE      | FEE    |    | RATE      | FEE          |
|-----------|--------|----|-----------|--------------|
| BASIC FEE | 375.00 | OR | BASIC FEE | 750.00       |
| X\$ 9=    |        | OR | X\$18=    |              |
| X42=      |        | OR | X84=      |              |
| +140=     |        | OR | +280=     |              |
| TOTAL     |        | OR | TOTAL     | <i>20.00</i> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

*2/14/06*

|   | (Column 1)                       |             | (Column 2)                         | (Column 3)    |
|---|----------------------------------|-------------|------------------------------------|---------------|
| AMENDMENT A   | CLAIMS REMAINING AFTER AMENDMENT |             | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|   | Total                            | * <i>20</i> | Minus                              | **            |
|   | Independent                      | * <i>3</i>  | Minus                              | ***           |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |             |                                    |               |

SMALL ENTITY

OR

OTHER THAN  
SMALL ENTITY

| RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
|---------------------|------------------------|----|---------------------|------------------------|
| X\$ 9=              |                        | OR | X\$18=              |                        |
| X42=                |                        | OR | X84=                |                        |
| +140=               |                        | OR | +280=               |                        |
| TOTAL<br>ADDIT. FEE |                        | OR | TOTAL<br>ADDIT. FEE |                        |

*1/9/06*

|   | (Column 1)                       |             | (Column 2)                         | (Column 3)    |
|---|----------------------------------|-------------|------------------------------------|---------------|
| AMENDMENT B   | CLAIMS REMAINING AFTER AMENDMENT |             | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|   | Total                            | * <i>12</i> | Minus                              | **            |
|   | Independent                      | * <i>2</i>  | Minus                              | ***           |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |             |                                    |               |

| RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
|---------------------|------------------------|----|---------------------|------------------------|
| X\$ 9=              |                        | OR | X\$18=              |                        |
| X42=                |                        | OR | X84=                |                        |
| +140=               |                        | OR | +280=               |                        |
| TOTAL<br>ADDIT. FEE |                        | OR | TOTAL<br>ADDIT. FEE |                        |

|   | (Column 1)                       |   | (Column 2)                         | (Column 3)    |
|---|----------------------------------|---|------------------------------------|---------------|
| AMENDMENT C   | CLAIMS REMAINING AFTER AMENDMENT |   | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|   | Total                            | * | Minus                              | **            |
|   | Independent                      | * | Minus                              | ***           |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |   |                                    |               |

| RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
|---------------------|------------------------|----|---------------------|------------------------|
| X\$ 9=              |                        | OR | X\$18=              |                        |
| X42=                |                        | OR | X84=                |                        |
| +140=               |                        | OR | +280=               |                        |
| TOTAL<br>ADDIT. FEE |                        | OR | TOTAL<br>ADDIT. FEE |                        |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
  - \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
  - \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.